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PREVELANCE OF DEPRESSIVE MANIFESTATIONS IN THE PERIMENOPAUSAL PERIOD

Thesis
Submitted in partial fulfillment of the Master degree in
Neuropsychiatry

By
Wessam Abdou El-Dod
(M.B.B.CH)

SUPERVISORS

Prof. Dr.

El-Sayed Abd El-Hamid Gad

Professor of Neuropsychiatry and head Of the
Department Of Neuropsychiatry

Faculty of Medicine
Tanta University

Prof. Dr.

Ibrahim Ali Kabbash

Professor of Public Health, Social & Preventive
Medicine

Faculty of Medicine
Tanta University

Dr.

Diaa Moner Aglan

Lecturer of Gynecology & Obstetric

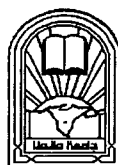
Faculty of Medicine
Tanta University

Dr.

Mai Abd El-Raof Eisa

Lecturer of Neuropsychiatry

Faculty of Medicine
Tanta University



Faculty of Medicine
Tanta University
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INTRODUCTION

Menopause is technically defined as the cessation of menses due to the loss of ovarian follicular function in the absence of physiological causes. The term perimenopause is used to refer to the period of transition beginning before the final menstruation and ending 12 months later (Carter, 1995).

It is this particular phase of the menopausal transition in which women report being most symptomatic; thus the perimenopausal period is the focus of current research. Women's experiences during this time are varied. Although some women report experiencing few symptoms, others report irregular menstrual cycles, physical symptoms (e.g. Hot flashes, night sweats, sleep problems, vaginal dryness, cognitive changes, and mood swings) (Hargrove and Eisenberg, 1995).

There are some evidences to support a relationship between perimenopause related hormonal changes and the onset of depression, although this remains controversial (Schmidt et al., 1998). Some epidemiological reports suggest that 10% of women involved in longitudinal studies have been observed to have had perimenopause related mood changes (Hunter, 1992).

The diagnosis of depression in the perimenopausal years is made in the same manner as depression occurring at other times in a person's life, with the speculation that the depression must occur in the context of the endocrine evidences of perimenopause (Schmidt et al., 1998).

Several risk factors have been identified for perimenopausal depression including :a history of postpartum depression ,history of premenstrual dysphoric disorder, history of depressive illnesses, longer perimenopausal period- at least 27 months, surgical menopause (i.e., oophorectomy) and thyroid dysfunction (Stewart & Boydell, 1993). In addition, several researches

have stressed the role that sociocultural factors may play a role in exacerbating perimenopausal symptoms (Haynes & Rarry, 1998).

Life stressors, such as caring for an elderly parent in combination with the negative social beliefs about aging, may increase perimenopausal symptoms such as fatigue or sadness (Hargrove & Eisenberg, 1995).

AIM OF THE WORK

The aim of this work is to study the prevalence of depressive manifestations in the perimenopausal period.

REVIEW OF LITERATURE

MENOPAUSE AND CLIMACTERIC

There are four events in the reproductive life of human female, the menarche, the reproductive cycle, pregnancy and menopause. The female climacteric is a phase in the aging process of woman that marks the transition from the reproductive stage of life to the non-reproductive stage, and during which the ovarian function ceases (Pasini, 1997).

Genazzani et al, (1999); considered a woman menopausal if the interval since last menstruation was more than 3 months between the age of 40 and 60 years. Different times of amenorrhea periods have been used to indicate that the women are definitely at the age of menopause.

Hauser et al., (1994) have defined a woman as postmenopausal if at least six months had elapsed since the last menstruation. Pasquali et al, (1999) considered eight months since last menstruation as the minimum to consider the woman menopausal. The most frequently used definition of natural menopause is amenorrhea for 12 continuous months without hysterectomy or other procedures that would have stopped menses; (Davey, 1995). Cessation of menstruation for 5 continuous years was used by some investigators as the criterion of definite menopause (Okaunofa et al, 1990).

At the time of menopause, there is variation in the manner in which the menstrual periods cease. Few women appear to reach menopause with no prior major alteration in cycle length (Wallace et al., 1970). This is rare but physiological. Another group of women may experience regular periods as before but the amount of blood lost being reduced at each successive period

until no blood is lost at all. In the third group of women, the menstrual cycle may be drawn out so that the menstrual bleeding occur at intervals of two, four or six months and finally do not return (Pasquali, 1999).

Studies done on a group of perimenopausal women indicated that an amenorrheal interval of six months is predictive of menopause in only 45% of women aged 45-49 years and in 70% of women more than 53 years of age. That is 55% & 30% of women in those respective age groups could be expected to have one or additional episodes of menstruation after six months without menses. So it is not uncommon to consider that a six months amenorrheal interval in premenopause is sufficient evidence that menopause has occurred (Davey, 1995).

Age at Menopause:

The age of menopause has remained remarkably constant for the last 500 years. The median age of menopause is 50.8 years (Whitehead et al., 1992). According to statistics 50% of women experience spontaneous menopause between the age of 45 and 50 years, 25% experience it between 40 and 45 years, 10% of women experience it before the age of 40 years "Premature menopause" and 15% of women experience it after the age of 50 years "Delayed menopause" without any evident explanation (Pasini, 1997).

The most factor known to influence the age of menopause is smoking (Jick et al., 1977). Tobacco users appear to undergo a natural menopause 1-2 years earlier than non-smokers. However, some women who have had oophorectomy and nulliparous may have earlier menopause (Davey, 1995). On the other hand, the age of menopause appears to be unaffected by socioeconomic conditions, race, parity, height, weight or body mass index (Brambilla & Mckinlay, 1989). Studies have failed to establish that the age of

menopause has specific relationship to the age at menarche, it appears to be determined genetically (Whitehead et al., 1992).

There has been suggestion that the mean age at menopause has increased by approximately four years over the past century (Passini, 1997).

But the estimates from the nineteenth and twentieth centuries showed marked and inconsistent variations and the early studies are unreliable due to some methodological consideration mistakes that led to a considerable underestimation of the age at menopause (Gray, 1976).

Woods & Mitchell, (1999); had also questioned the hypothesis that there has been a progressive delay in the menopause in recent years.

In contrary to the above beliefs that the age at menopause is increasing, Rousseau, (1998), who reviewed records from the 6th to 15th centuries found that the average age at menopause remained remarkably constant at about 50 years of age. Mcquaide, (1998), reported that age at menopause remained at a relatively fixed point in life span of women for even longer than 14 centuries.

Age at Menopause and Life Expectancy:

The number of women experiencing and living around the age of menopause has increased slowly over the centuries with the progressive increase in life expectancy (McKinlay et al, 1985). The average span of life in Roman' times was believed to be 25 years. In England, the average life expectancy was 40 years and it has been estimated that at this time only 25% of women lived to experience menopause. It was not until the present century that the average expectation of life reached about 50 years. Since 1900, the life expectancy has rapidly increased and now approaching 75 years for females in the developed countries. It reached 80 years at the year 2000. In developed countries approximately 95% of women live to experience menopause. Fifty to

sixty percent achieve the age of 75 years and a third or more of all women are perimenopausal or postmenopausal (Davey, 1986). So given an average age at menopause of about 51 years and a current life expectancy of about 80 years in developed countries, women can now expect to live nearly one half of their lives beyond menopause (Rudolph et al., 2000).

Factors Influencing the Age at Menopause:

I-Age at Menarche:

Menarche represents the onset of first menstrual period. The age at menarche has much been investigated in many countries, and it was found that the onset of menstruation is influenced by several factors especially nutrition and environment (Dewhurst, 1986). Older studies suggested that early menarche was followed by late menopause, However, it was proved that there was no relationship exhibited between menstrual and menopausal ages of either married or single women (Abranson, 1960). This lack of an association between age at menarche and age at menopause is consistent, with findings from several other studies; (Okaunofa et al., 1990).

On a study done by Cramer, (1993) about the age at menarche and age at menopause and their relation to childhood mumps infection, they had reported that there were no significant differences in age at menarche and age at menopause between cases and control subjects.

II-Smoking:

Excluding artificial menopause caused by oophorectomy, irradiation or gross disease, the only factor known to influence the age at natural menopause is smoking. Smoking causes an earlier menopause even in women who give up smoking years before menopause (Morse et al., 1998).

Rousseau, (1998); had found that the mean age at menopause was 49.4 years among non-smokers, and ex-smokers (those who had smoked regularly but currently smoked no cigarettes), 48 years among women who smoked 1-14 cigarettes per day and 47.6 years among those who smoked at least 15 cigarettes per day. They had also found that the differences between never smokers and each of the three categories were statistically significant but among the current smokers the differences by the level of smoking were not significant. The median ages at menopause derived from life table analysis were 52.4 years for never smokers and 51.9, 51.0, 50.7, and 50.4 years respectively for women smoking 1-14, 15-24, 25-34 and 35 or more cigarettes per day.

Among current smokers aged 40 - 49 years for whom there was a substantial overall relationship between smoking and menopause incidence, the incidence of menopause was strongly related to number of cigarettes smoked per day (Morse et al., 1998).

On the other hand, many other studies have found no relation between smoking and age at natural menopause. **Brambilla & Mckinlay (1989)**; had reported no consistent relationship between smoking and age at menopause. This lack of relationship is inconsistent with prior studies, which indicate a 1-2 year's earlier menopause among smokers. This discrepancy in Morse investigation is attributed to the fact that Morse put ex-smokers with non-smokers and compared them with women who had never smoked. The age at menopause among ex-smokers is more similar to that of women who had never smoked than to that of current smokers so the approach used by Brambilla probably obscured the effect of smoking (**Genazzani et al., 1999**).

The mechanism by which smoking can affect menopausal age:

1- Benzapyrin; a polycyclic aromatic hydrocarbon which is a component of cigarette smoke, destroys the primordial oocytes in the ovary of mice either by direct toxic effect or enhancing atresia of primordial oocytes (Matisson & Shorris, 1978).

2- Smoking may accelerate ovarian involution and aging in general perhaps as a result of increased oxidation of cell membrane caused by combustion products such as nitrogen dioxide

3- It has been suggested that smoking may enhance the hepatic metabolism of estrogen thereby leading to an earlier drop of its level. (Okaunofa et al., 1990).

4- Cigarette smoking may have an effect on central nervous system hormone release.

But none of the above theories have been fully studied (Morse et al., 1998).

III-Marital Status:

The influence of marital status on the age at menopause had been investigated frequently in the past in many studies. It was found that single women have an earlier menopause. Many investigators indicated an influence of marital status on the age at menopause (Brambilla & McKinlay et al., 1989).

While other investigators (Pasini, 1997) did not find this correlation.

IV-Occupation:

From an analysis distinguishing between a group consisted mainly of skilled employees and a group consisted mainly of housewives, Pasini, 1997; suggested that some types of occupations might have, an important effect on